

FACSIMILE COVER SHEET

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August 30, 2004

TO: Examiner Horlick (TC1600)

GROUP: 1637

FAX NUMBER: 703-872-9307

ATTORNEY DOCKET NO.: DEX-0283

SERIAL NO.: 10/001,870

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MESSAGE: Attached please find Amendment Transmittal Letter; Reply under 37 C.F.R. §1.116 mailed May 28, 2004; and Certificate of Transmission by Facsimile.

Kathleen A. Tyrrell, Registration No. 38,350

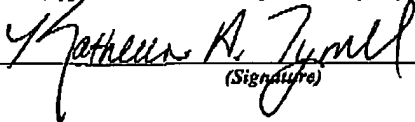
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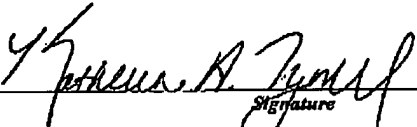
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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)		Docket No. DEX-0283	
Applicant(s): Salceda et al.			
Application No. 10/001,870	Filing Date November 20, 2001	Examiner Horlick, Kenneth R.	Group Art Unit 1637
Invention: Compositions and Methods Relating to Prostate Specific Genes and Proteins			
<p>I hereby certify that this <u>Reply under 37 C.F.R. 1.116</u> <small>(Identify type of correspondence)</small></p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9307</u>)</p> <p>on <u>August 30, 2004</u> <small>(Date)</small></p> <div style="text-align: right; margin-top: 100px;"> <u>Kathleen A. Tyrrell</u> <small>(Typed or Printed Name of Person Signing Certificate)</small>  <small>(Signature)</small> </div>			
Note: Each paper must have its own certificate of mailing.			

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. DEX-0283	
Applicant(s): Salceda et al.						
Application No. 10/001,870	Filing Date November 20, 2001	Examiner Horlick, Kenneth R.	Customer No. 32800	Group Art Unit 1637	Confirmation No. 3400	
Invention: Compositions and Methods Relating to Prostate Specific Genes and Proteins						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	12 -	20 =	0 x	\$18.00	\$0.00	
INDEP. CLAIMS	1 -	3 =	0 x	\$86.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-1619 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Kathleen A. Tyrrell, Reg. No. 38,350			Dated: August 30, 2004			
Licata & Tyrrell P.C. 66 East Main Street Marlton, New Jersey 08053 Tel : 856-810-1515 Fax: 856-810-1454			<div style="border: 1px solid black; padding: 5px;"> I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Signature of Person Mailing Correspondence </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Typed or Printed Name of Person Mailing Correspondence </div>			
CC:						